

ARIZONA MINI SPRINT ASSOCIATION

Release and Waiver of Liability and Indemnity Agreement

I understand racing is a DANGEROUS SPORT and I may be injured, crippled or killed. I hereby assume full responsibility for any risk of bodily injury, death or property damage due to the negligence of releases or otherwise while in or upon the restricted area and/or while competing or for any purpose participating with the ARIZONA MINI SPRINT ASSOCIATION (A.M.S.A.), an Arizona Corporation, BOARD, OFFICERS, SPONSORS and/or MEMBERS. I, the undersigned have read and voluntarily sign this release and waiver of liability and indemnity agreement. I further understand NO Medical Insurance is available from A.M.S.A., and I am solely responsible for any medical assistance, treatment and/or transportation to any medical facility as a result of any injury sustained while participating in any way with A.M.S.A.

Signature of Participant _____
(Signature must be notarized, sign in front of Notary Public.)

Signature of Parent and/or Guardian if under 21 _____
(Signature must be notarized, sign in front of Notary Public)

STATE OF _____

: ss.

COUNTY OF _____

On the ____ day of _____, 20____, before me, a Notary Public in and for said County and State, the undersigned personally appeared _____, known to me, (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged that he/she/they executed it.

WITNESS my hand and official seal.

Notary Public

When notarized please mail to:

A.M.S.A.
C/O Katherine Aragon
1729 E. Apollo Rd
Phoenix, AZ 85042